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TALLAHASSES TO STATE

APR 1 0 2019 K. Brumbley

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: JC	LUERVO POPE (PROPOSED CORPORA	RTIES, I	NC.
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED		PY REQUIRED
FROM:		(Printed or typed)	
	57 Fox		
MeRRICK, NY, 11566 City, State & Zip			
	516 - Daytime T	680-6174 elephone number	
	JCUERVO 10 7 E-mail address: (to be use	12 @ g-mail, C	ovy(

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporate	tion shall be: <u>JCUERVO</u> Pr	roperties, In	C,	
ARTICLE II PRINC		Mailing ad	dress, if different is:	
			MERRICK, NY	
Unit: 239) 	11566		
ARTICLE III PURPO The purpose for which the	DSE the corporation is organized is: ReN	tal propert	<u>y. </u>	
			Za e	
			9APR -3 CARLARY O	
ARTICLE IV SHARI The number of shares of	stock is:	₩	AM 8: 34 F STATE FEBRIDA	
	<u> L'OFFICERS AND/OR DIRECTORS</u> :: JAMES CUERVO, Presiden	. 		
	57 FOX Blvd Nerrick, NY, 11566			
Name and Title:		Name and Title:		
Address				
Name and Title				
Address		Address:		
				

Address	Address:				
	- -				
ARTICLE VI REC	GISTERED AGENT da street address (P.O. Box NOT acceptable) of the registered	agent is:			
Address:	7193 West Country Club Dr XN.	orth			
<u>.</u>	JAMES CUERVO 7193 West Country Club Dr AN SArAsota, FIA, 34243 UNIT: &	35			
ARTICLE VII INC	<u>CORPORATOR</u>				
	ess of the Incorporator is:				
Name:	JAMES CUERVO				
Address:	57- Fox Bluch				
	HEARICK, NY, 11566				
ARTICLE VIII EF Effective date, if other (If an effective date filing.)	er than the date of filing: MAY 2 = 2019 is listed, the date must be specific and cannot be more that	(OPTIONAL) n five days prior or 90 days after the			
	serted in this block does not meet the applicable statutory filing tive date on the Department of State's records.	g requirements, this date will not be listed as			
	as registered agent to accept service of process for the above familiar with and accept the appointment as registered agent				
- Dur	Required Signature/Registered Agent	3/23/19 Date			
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.					
Some	sonem	3/23/19			
Required	Signature/Incorporator	Daté			

Name and Title:______ Name and Title:_____